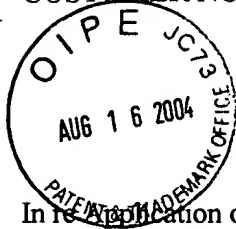


CUSTOMER NO. 30430

PATENT APPLICATION  
Docket No. 99-OT-118



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of:

Vareljian

Serial No.: 09/408,742

Filed: September 30, 1999

For: TELEPHONE LINE INTERFACE CIRCUIT AND METHOD

)  
)  
) Group No.: 2643

)  
) Examiner: B. Tieu  
)

**RECEIVED**

**AUG 23 2004**

**Technology Center 2600**

Commissioner for Patents  
Mail Stop AFTER FINAL (AF)  
P.O. Box 1450  
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING	
Date of Deposit:	08-12-04
I hereby certify that this paper or fee is being deposited with the U.S. Postal Service first class mail on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450	
Type or Print Name	MARGO BARBARASH
Signature	

Dear Sir:

REQUEST FOR RECONSIDERATION

In response to the Final Office Action dated July 22, 2004, reconsideration of the application is respectfully requested in view of the enclosed Remarks.

CUSTOMER NO. 30430

AF/61  
2643

AMENDMENT TRANSMITTAL LETTER				Docket No. 99-OT-118	
Application No. 09/408742-Conf. #4407		Filing Date September 30, 1999		Examiner B. K. Tieu	
Art Unit 2643					
Applicant(s): Albert Vareljian					
Invention: TELEPHONE LINE INTERFACE CIRCUIT AND METHOD					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims		- 20 =		x	
Independent Claims		- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>10-0447</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
_____ Andre M. Szuwalski Attorney Reg. No.: 35,701				Dated: <u>August 12, 2004</u>	
JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION 1445 Ross Avenue, Suite 3200 Dallas, Texas 75202 (214) 855-4500					
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Dated: <u>08-12-04</u> Signature: <u>(Margo Barbarash)</u>					

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